



A program of **Maine Parent Federation**

Maine Parent Federation

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Front Page News

Maine Parent Federation is proud to announce the addition of a new program- the Family Support Partner Program. We recently contracted with case management agencies (WINGS, Catholic Charities and Spurwink) to provide Family Support Partners (FSPs) in three regions of the state. FSPs provide support, skill development, resources, and encouragement for families who are involved in the High Fidelity Wraparound Program. FSPs are parents who have experience with family members being served in behavioral health and other systems. They will take an active role helping families navigate through these systems. FSPs are integrated into teams that are community and strengths-based, family centered, needs-driven, and culturally competent. In addition to the three FSP's we have currently working with families in Aroostook and Washington Counties, we have hired two additional members of the team to work in Washington County with our partnering agency, Catholic Charities. Please welcome aboard Janie and Georgia!! This month we begin accepting referrals from Spurwink in Androscoggin County. Huda Daud, who has worked with us for the past two years supporting families in the Immigrant refugee community, will serve as an FSP for Somali families being served by Spurwink's High Fidelity Wraparound program. For more information on the High Fidelity Wraparound Program check out the "What's New?" page on our website at www.mpf.org



Legislative Updates



Contribution by Andrea Irwin

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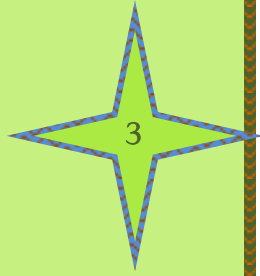
New YouTube Videos Available - Watch and Learn More About the Affordable Care Act!

Recognizing that people best absorb information in a variety of ways, we have made our first attempt at translating a selection of our written educational materials into YouTube video format! Here are summaries and links for the three videos that we have created, each one focused on the Affordable Care Act and what it means for Maine:

- 1. Affordable Care Act Overview**
A review of what national health care reform means for you and me, with examples of things you can expect right now. [click here](#) (Ctrl and Click on this link)
- 2. Maine's Pre-Existing Condition Insurance Plan (PCIP)**
Adults may be able to join a new insurance plan that includes some discounts, even if they have not been able to find a plan that covered them in the past. [click here](#) (Ctrl and Click on this link)
- 3. Young Adult Coverage**
Young adults(age 26 or younger) may be able to keep or join their parent's private health insurance plan, even if they are married, have jobs, move away from home, or are financially independent. [click here](#) (Ctrl and Click on this link)

www.mainecahc.org

**Maine Children's Alliance, Maine Equal Justice
Partners, Maine Center for Economic Policy:
Summary of Important Legislative Action
Affecting Children and Their Families**



Overview of Action on Programs Providing Assistance to Children and Families

While most proposed changes to **MaineCare** were defeated, in large part due to the hard work of our allies in the advocacy community, MaineCare coverage for legal immigrants was seriously restricted [see below]. Proposals to restrict access to **General Assistance** and **Alternative Aid** were also defeated, but several restrictive TANF changes were passed, and assistance for legal immigrants--MaineCare, TANF, Food Supplement (formerly Food Stamps) and SSI--was cut or, in some cases, eliminated.

Temporary Assistance to Needy Families (TANF)

Time Limits

Beginning January 1, 2012, there will be a 5-year time limit in the TANF program. This limit will include the time families received TANF before January 1, 2012, as well as time going forward. Fortunately, there will be some exceptions. The following groups will still be able to receive assistance after 5 years:

- ✓ Households in which an adult or family member has an illness or impairment that limits ability to work;
- ✓ Domestic violence survivors;
- ✓ People enrolled in an education or training program;
- ✓ Certain caretaker relatives who are not the parent of the child and are needed at home to care for the child; and lastly;
- ✓ Those facing other hardships as determined by DHHS.

In the next few months DHHS will clarify who may continue to receive assistance after 5 years.

Sanctions

Beginning January 1, 2012, a new sanction process will be put in place. For the first sanction, only the adult will lose benefits. If he or she does not comply within 90 days or receives additional sanctions, the whole family will lose benefits, unless the adult has good cause. They may receive benefits again, once they comply. Parents sanctioned before January 1, 2012, will be given a chance to comply with program rules. If they do, the family will begin to receive assistance again.

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Cuts to Programs that Assist Legal Immigrants

TANF, SSI and Food Supplement for Legal Immigrants

Current recipients: Legal immigrants who are currently receiving TANF, SSI and Food Supplement benefits through a state-funded program will continue to get assistance as long as they are eligible (i.e. "grandfathered" to get benefits).

New applicants: New applicants will only be eligible for these programs if they are: elderly and/or disabled; domestic violence survivors; or fit into some other hardship category such as waiting for a work permit. DHHS will spell out what counts as a hardship. Elderly and/or disabled legal immigrants will continue to qualify for SSI. All children will also continue to qualify for Food Supplement benefits.

MaineCare for Legal Immigrants

Legal immigrants will no longer be able to get MaineCare through a state-funded program. This impacts immigrants who are here lawfully but do not qualify for federal assistance because they have been unlawful permanent residents for less than 5 years or because they are awaiting a determination of citizenship status. These changes went into effect on July 1, 2011. This cut does not apply to children under 21 and pregnant women up to 60 days following delivery. They will continue to be eligible for MaineCare.



Other Children's Legislative Issues

Wages and Hours of Employment for Minors-LD 516

The legislature passed an amended version of LD 516 that made several changes: 17-year-old minors will be permitted to work 24 hours during the school week (it was a 20-hour limit); 6 hours per day when school is in session (it was a 4-hour limit); and until 10:15 pm before a school day (it had been 10 pm). While the result was not what advocates for maintaining previous limits wanted, the final language was a substantial victory for limiting work during school hours.

Medicaid Funding for Education-LD 1003

This bill sought to require DHHS to correct problems in Medicaid/MaineCare billing for schools. The bill died in Committee. Commissioners Bowen (Dept. of Education) and Mayhew (DHHS) acknowledged the problem and are committed to working on a resolution.

Unified Early Childhood System-LD 568

This would have established an Early Childhood Stakeholder Group to develop a plan for an integrated early childhood system. It passed in the Legislature, but was vetoed by the Governor (as were most study bills). Agreement was reached to transfer responsibility for the study to the Children's Growth Council (CGC). The CGC will make a report to the second session of the 125th Legislature with recommendations for an integrated early childhood system. MCA will provide staff support for the CGC's work.

Charter Schools-LD 1553

[The charter schools bill](#) sets up a state commission of seven people with the authority to approve up to 10 charter schools in the next 10 years. The bill also allows individual school boards to create charter schools within their district. These would not count toward the commission's 10-school cap. Charter students' tuition costs will be funded by dollars that follow them from their traditional school system. To help avoid major impacts on traditional schools, the charter school bill puts limits in the first three years on the number of students from a given school that can enroll in a charter school.

Tax Credits for Tuition Paid to Private Schools-LD 1044 and 1092

These tuition tax credits bills did not pass. Public school advocates argued that tuition tax credits would result in serious financial harm to public schools. Advocates for tuition tax credits argued that tax credits would expand the options available to students recognizing that learning needs vary and families should have broader choices.

Enhanced Tax Credit for High Quality Child Care Sites-LD 1118

This bill, supported by the Maine Children's Alliance, did not pass. It would have amended the income tax credit for child and dependent care expenses to provide an enhanced credit aligned with the Quality Ratings Level (QRL) administered by DHHS. The bill also would have expanded the tax credit for quality child care investments to include contributions to a public-private partnership fund certified by DHHS, Office of Child Care and Head Start.

Circuit Breaker Program-LD 474

This bill did not pass. It would have increased the maximum property tax and rent refund benefit by 20% and streamlined the program to increase participation. No positive changes to the Circuit Breaker Program were enacted. The new biennial budget requires a 20% cut to the General Refund portion of the program.

Maine Earned Income Tax Credit-LD 695

This bill also did not pass. It would have expanded the Maine earned income tax credit (EITC) from 5% to 10% and made it refundable. This bill also enjoyed broad public support, but did not pass either the House or Senate. The Legislature did not enact any changes to the EITC this session.

Anti-Bullying in Schools and Anti-Cyber bullying-LD 1237 and 980

These bills were expected to pass but, after 11th hour opposition by the Christian Civic League of Maine, were instead sent back to the Education Committee. They will be carried over and considered again in the 2012 session. The bills call for schools to adopt clear anti-bullying rules, including harassment that occurs over cyberspace.

We are grateful to our colleagues at Maine Children's Alliance (MCA), Maine Equal Justice Partners (MEJP) and the Maine Center for Economic Policy (MECEP) for their excellent work on behalf of children and families and for their legislative summaries on benefit programs and taxation issues which we have incorporated here.



Regional Events



Region 1: Cumberland, York, Androscoggin, Oxford Counties

Parent-to-Parent Support: Parents are needed to support other caregivers of children with special health care needs. Your experience can help support families through the maze of complex issues that can arise when raising a child with special health care needs. Please call Theresa for more information.

Family Support Partner Program: MPF is delighted to announce a new program, which will provide Family Support Partners (FSP's) who will work in partnership with High Fidelity – Wraparound Maine. FSP's are parents who have experience with their child in the mental health system and are ready to take a more active role in helping other families navigate the systems. FSP's are trained parents who are integrated into powerful teams that are family centered and success orientated. FSP's provide support, skill development, resources, and encouragement to families receiving this service. Please call Theresa to learn more.

Host Homes Needed

Who Can Be a Host Home? Single people, married people, older people, younger people, current and former foster families...people like you who care enough to help a teenager overcome unfortunate situations and brighten their prospects for the future. We are looking for people willing to share their homes with a teen in Cumberland and York Counties. Call New Beginnings at 795-4070 and ask for Jada to learn more about Host Homes.

Region 2: Mid-Coast Region: Waldo, Lincoln, Knox, Sagadahoc, and Brunswick Counties

9/29 Belfast Area Transition Meeting- 6 to 8 pm at Broadreach in Belfast. This meeting will introduce families who are raising junior high and high school students to transition planning around work, housing, financial planning, guardianship, case management, transition age and adult services. Please contact Beth for more information.

10/4 Monthly Transition Meetings-Beth Jones of MPF, David Cowing of Mt. Ararat H.S. and Paul Barron of Brunswick H.S. will hold monthly meetings on transition issues at Brunswick H.S. from 6 to 8 PM. Topics will include information on housing, health maintenance, finances, SSI, employment, and interviews with young adults in transition or who live independently. FMI: Beth Jones at bjones@mpf.org or Cullen Ryan at cullen@chomhousing.org

10/1 Support Parent Training -Saturday from 10 AM to 2 PM at Camden Hills Regional H.S. Beth is facilitating this training for parents raising a child with special healthcare needs who are interested in mentoring and "giving back" as parent volunteers. Travel reimbursement and a lovely lunch provided. Please contact Beth Jones to register.

2nd Monday Meetings of the Maine Housing and Quality Services Coalition- from 12-to 2 PM. This is a coalition of experienced parents, providers, DHHS staff, attorneys, and state representatives—meets in Portland for good pizza, great info by invited speakers, meaningful dialogue about long-term, comprehensive planning for adults and transitioning youth with special needs. This is a ground-breaking group. FMI, please contact Cullen Ryan at cullen@chomhousing.org or Beth at bjones@mpf.org.

Region 3: Kennebec, Somerset, Piscataquis, Franklin Counties

9/27 Support Parent Training -Tuesday, from 5 to 8 pm at Franklin County

Children's Task Force in Farmington. Please contact Veronica for more information or to register.



More Regional Events



Region 4: Penobscot & Southern Aroostook

A series of workshops will be held throughout Aroostook County in 2011. Workshops will be located in Houlton, Presque Isle, and Fort Kent. The monthly workshop topics are listed below under **Region 6**. Please call Robin for more information on dates and times of workshops in *Southern Aroostook*.

Hermon Area Parent Support Group meets every six weeks. FMI call Tammy at 848- 0756.

Parent-to-Parent Program – Please call Robin if you are interested in learning more about becoming a trained support parent, or receiving support from a trained parent.

Region 5: Washington & Hancock Counties

Bahia Yackzan seeks parent support group opportunities for parents of children with special needs. Bahia is a great source of support for any parent of a child with special needs, particularly children affected by substance use in utero or born pre-term. Bahia can provide one-on-one phone support to parents and support at group meetings. She is available to present an overview of MPF programs and facilitate parent groups for parents or parent organizations. Please call Bahia with questions or suggestions related to parent support in Washington County at 598-7424 or email byackzan@mpf.org.

Region 6: Northern & Central Aroostook Counties

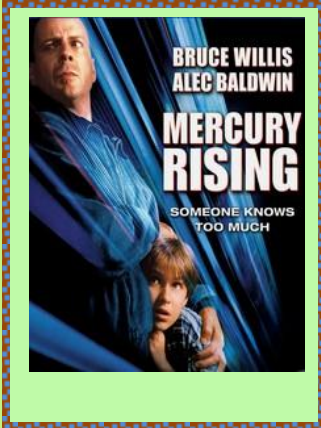
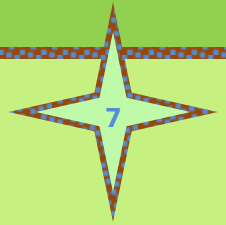
PARENT-TO-PARENT SUPPORT: Any parent of a child with special health needs or a child with disabilities, who would like to offer another parent the benefit of their knowledge, are invited to become a support parent. We offer a training to help prepare you to assist other families. It is free, easy, and very rewarding. Please contact Catherine for more information.

CHILDREN WITH SPECIAL HEALTH NEEDS PARENT GROUP: We are interested in providing an opportunity for families who are raising a child with special health needs to come together for the purpose of support and education. We would love to hear from you if you or someone you know is raising a child who spends a great deal of time in the doctor's office. The purpose of the group is to bring together families who may otherwise feel alone. We want to provide support as well as learn from each other. Most importantly, we want to be able to create social opportunities for our children. Please contact Catherine for more information.

AROOSTOOK COUNTY WORKSHOPS THIS FALL: Fort Kent, Presque Isle, and Houlton

- ❖ **September** –“Relationship Development –Learn how to set boundaries”
- ❖ **October**- “Understanding Health Care Options – Learn what is available”
- ❖ **November**- “Managing Stress –Learn how to manage day-to-day stressors”

Each session will be offered twice –
as a **LUNCH AND LEARN** from 11– 1 and an **EVENING SESSION** from 6 – 8
Please contact Catherine for specific dates & locations!



Movie Review

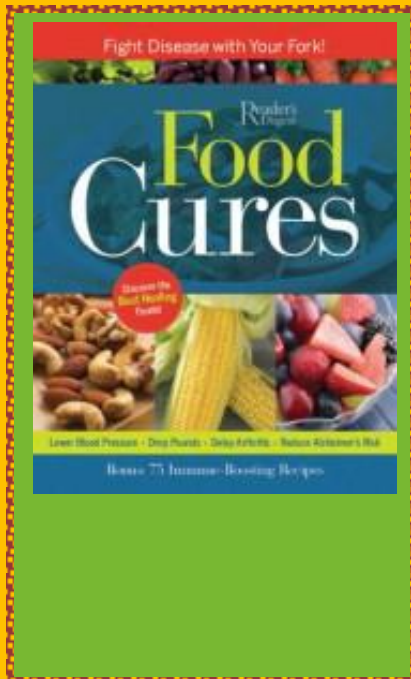
1998 Action/Adventure Film

Rated: R for Violence & Strong Language

According to our staff movie critic, a mom who's 19 year old son is in the Autism Spectrum, this older movie is worth *a second look!*

Bruce Willis stars as Art; the FBI agent trying desperately to do the right thing after a rogue national security agency develops a code they believe to be unbreakable, and then goes after a young boy who succeeds in breaking it. Milo Hughes plays Simon, the brilliant young boy with Autism who unwittingly breaks their code; completely unaware of the danger he has just put himself in. Rather than altering the code, the agency sends an assassin to kill the boy and his family. When the FBI agent (Willis) assigned to investigate Simon's disappearance makes a pivotal decision to act on his own to protect the boy from the assassin and Lt. Colonel Nicholas Kudrow (Alec Baldwin) of the rogue security agency, that decision leaves him out in the cold with the FBI. As the tension builds, the viewers witness the growing bond between the boy and the FBI agent. This is an action film with a heart and it is because of this emotional core that it has the capacity to appeal to a wider audience. Enjoy!

Book Review



Reader's Digest's "Food Cures"

Fight Disease with Your Fork

Learn to rely less on pills & more on real food....

We are living in a time of superfoods. The foods described in this book are bursting with compounds that have specific and well defined health benefits. Discover cures and treatments from everything from allergies to insomnia. Packed with hundreds of practical hints and tips on how you can treat the most common ailments; naturally, safely, and deliciously. Here is a sampling of what's inside: the top 20 healing foods, the top 10 healing herbs & spices, "smart carbs", food cures for common conditions such as: Asthma, ADHD, depression, infertility, and sinusitis(there are 57 in all), and healing recipes. These easy recipes are both healthy & tasty and beautifully illustrated. For example; Pasta with Walnut cream sauce, and Corn, tomato, & Quinoa Salad. Yum! Ask Robin Levesque, our book critic, which are her tried & true recipes...she'd be happy to share her culinary secrets!

Special Event

8



“Raising Successful Readers”

Friday September 23, 2011

10am- noon

Mid Coast Maine Community Action, 7 Union Street, Rockland

Presented by: Norm LeBlanc of GEAR Parent Network

Why is raising a reader so important? On a basic level, reading is a fundamental part of existing. Think about your typical day. How often do you read something: street signs, reports, emails, grocery labels, medication info, newspapers, websites, and stories to your kids? This workshop offers an understanding of how to engage your child in reading. Reading to our children routinely in their early years increases their language development, helps your child develop an attention span and concentration skills. A child that reads well is more likely to develop positive self esteem, independence and many other skills needed to last throughout their life. Join us to share reading strategies and meet other parents who are interested in striving to raise successful readers!

Call today to register at 1-800-264-9224 or 721-0161

To register for this event and view other GEAR events go to www.gearparentnetwork.org

A Family Story

OMG

My Child has just been given a DX!!!!

“What’s a DX?????”

Written by: Theresa Hermanowski



To parents who are new to “the system,” “Welcome to ‘the club.’” To those who have been in a while, “Nice to see you;” and, to those who have been here a long time, “Thank you for the help, tutelage, and understanding along the way.”

The following story just touches the surface of our rural Maine family’s experiences raising three boys with three sets of special needs. I’ve learned that for parents like us, a “DX” (diagnosis) is a work in progress, and only part of our child’s story. At the time of this writing, our oldest son is learning about adulthood, which he’ll soon enter; our middle son is dealing with high school academic challenges and driver’s ed.; and our youngest is entering puberty and transitioning from elementary to middle school.

Corey, age 16, has been diagnosed with: Autism, Bi-Polar, Mentally Retarded (MR), Seizure Disorder, Bi-lateral Hearing Loss, (mild) Vision Impairment, Spina Bifida, Enuresis, Attention Deficit Hyperactivity Disorder (ADHD), Obsessive Compulsive Disorder (OCD) and Narcolepsy.

Codey, age 15, has been diagnosed with: ADHD, Oppositional Defiant Disorder (ODD), mild OCD, Depression, a transient Tic Disorder, a mild Hearing Loss, and is Learning Disabled in Language Arts.

Colby, age 10, has been diagnosed with: Asperger’s Syndrome, OCD, ODD, ADHD, and Trichotillomania.

It’s been quite a journey, and it’s far from over. My husband and I did not finish college, and there are still times when providers who are people supposed to be helping our family, ignore the information we parents offer them. We feel that some attempt to use their education to intimidate or impress us. It’s as if their book knowledge can surpass our living knowledge. This can make a tough situation worse.

To get to the acceptance, the strength and the drive we have as parents today, we had to work through a lot of anger, denial and guilt. The anger was mostly frustration, which, at times, especially in the beginning, was so overwhelming that it bordered on hopelessness. But then our firstborn would do something miraculous-- stand on his own, say his first word, sign his first word in proper context, or feed himself with his fork or spoon, and all the anger and frustration would vanish. We’d celebrate those HUMUNGOUS milestones for hours! We truly love to watch each of our sons do things that specialists said they would “never” do. We love it when our sons prove the doctors wrong!

Milestones may be few and sometimes very far between, but the joy, pride and awe they bring are worth the wait and effort. My aunt understands this well. Her daughter never spoke until she was in her mid 20’s. Then suddenly, her first word for her single parent was “Ma.” It is still her one and only word and she is turning 40 in the spring. Milestones at any age! Take them when they happen.

I wrote this to tell our story, and to let you know you are not alone. Your experiences may be similar to ours, or maybe not. If they are, my heart goes out to you. Even though everyone’s experience is unique, there are others out there who understand. You don’t have to go it alone. Life does get better. It gets easier. You adjust, and no matter how hard, difficult, or exasperating, you can do more than just survive!

This story only begins to touch the surface of our lives. We've occasionally lived with relatives when the need arose. We've switched agencies several times, or fired them. We've rescued Colby and Codey from a fire that Corey started, and managed to convince the fire marshal that a child with disabilities does not need to go to "juvenile hall." That took a lot of talking and intervention from other people, too.

We have had a hard time getting a much-needed break. Because our kids were difficult, our natural supports were unwilling or unable to help. A couple of my sisters used to babysit in the evenings every five or six months for us. Our kids never spent the night at either of their grandparents' homes. Codey has stayed over at friends' houses, but *the three boys only spent one night away from us*, and my sister never took that on again.

I feel that I am my kid's most important supporter. Often, I'm not only their teacher, but also the one trying to teach others how to deal with and understand them. They don't yet advocate for themselves, and I don't expect anyone else to do it for them. I helped create them; therefore I must help take care of them. I've grown a backbone and what feels like quills to deal with providers over the years either to get answers or services.

Whatever my husband and I have done for our sons, it was to make their lives better and easier, and therefore it makes our whole family's life better. We love our kids and know that their uniqueness defines them, not their disabilities. They make us laugh and cry, and tap every other emotion we have. We're enjoying our three sons while we can, knowing that life is short. We get older and they grow up...fast. Suddenly, we're starting a whole new chapter of transitioning our oldest son into adult services.

I believe your journey will be easier the more you lean on my story and the stories of other parents, who are willing to hear your story and be a help to you along your way. Listen to us. Listen to your own heart. Learn, laugh, and love, and you will be a better parent and a stronger advocate for it. Good luck!

Here are some "pearls of knowledge" that I and other parents have contributed to help you out. I hope these help; use what you can.

- ✚ Behavioral and mental diagnoses aren't easy to see, and therefore are not as readily understood or accepted by others.
- ✚ Become an ambassador for goodwill, by accepting help from others that you don't necessarily need, (i.e., door holding). This continues their helping others who do need it, and everyone else around sees this and learns to pay it forward.
- ✚ Knowledge is power!!! Learn everything that you can, exhaust every resource, understand each term, diagnosis, Special Education rule, and medication as quickly and as thoroughly as possible.
- ✚ Advocate, advocate, advocate!!! Don't let others force you into something that you don't want. Gather as much information and supports as you can. There can sometimes be other alternatives to try first. You have the final and ultimate say in your kids and their needs.

- ✦ You were given this gift of a child or children because you as parents could handle it. Be strong for them and advocate well.
- ✦ Having your child grow up and still need specialized help, doesn't make you a failure as a parent. Your child is not "broken"; therefore, you cannot "fix" them.
- ✦ Teach your service providers to listen to you; this may be their jobs; however this is our lives and we don't get to leave it at the office.
- ✦ There is no such thing as a "textbook-case". Each child is different and should be treated as such.
- ✦ For our kids: routine is security; and security is routine.
- ✦ Teach your children to be as independent and individualized as possible. There is truly a "diamond in the rough" there. Not only will they be proud of their accomplishments, so will you.
- ✦ Make "friends" with your local emergency personnel, and educate them about your child and their unique qualities. Keep them updated with anything new or major. Make sure that they meet the child occasionally. This will ease any undue stress from all parties involved, especially the child's, in an emergency.

Keep a written "chart" about your child. Include in it: a current photo, diagnoses, medications, special care techniques, prior surgeries/hospitalizations, allergies, ages of milestones, doctors names and numbers, case managers, service providers, and any other emergency contacts for them and for you. It's easy to forget important information in an emergency situation.

- ✦ Don't forget that you have a name beyond "Mom" or "Dad". Take time for yourself, regularly: be it 10 minutes per day, date night every week, or kids at grandma's for an overnight once a month; just to remember who you are, and it will make you a better parent.

NOTE: This is an excerpt from the original "OMG" written by Theresa Hermanowski.

If anyone would like to read the original version in its entirety, please email Robin Levesque our Regional Coordinator for Southern Aroostook and Penobscot Counties at rlevesque@mpf.org.

Pine Tree Society's Autism Family Weekend **Friday, September 23 to Sunday, September 25, 2011** **Pine Tree Camp, Rome, Maine**

It's been said that when a child has autism, the whole family has autism. Pine Tree Society is pleased to offer a new program that is designed to impact the entire family. If you are a parent or family member, please think about joining us. If you are a provider, please help us spread the word to those who may be able to benefit.

Click here to learn more or to download an application.

The Autism Family Weekend is designed to offer a unique, fun-filled opportunity for the whole family to get away and enjoy time together in a beautiful natural setting. It's a chance to take a trip without fear of judgment and with added individualized support so that parents and caregivers have a chance to relax and recharge.

Each family will have time to participate in traditional, barrier-free activities that will strengthen their natural bonds. There will be time to participate in small peer group programming designed to meet the needs of individual family members. Children with autism will benefit from programming featuring low-anxiety social experiences that are positive and well supported by Pine Tree Society expert staff. Parents will participate in three training workshops offering the opportunity to gain new skills while connecting with others and naturally creating supportive networks that will last well beyond the close of the weekend. Siblings will have fun participating in various camp activities, meeting new friends and participating in Sibshop programming.

To learn more, please visit www.pinetreesociety.org or call (207) 443-3341.
Applications are available now.

Amy M. Fickett
Marketing Assistant
Pine Tree Society
149 Front Street
Bath, ME 04530

(207) 443.3341 (tel/tty)
www.pinetreesociety.org

Nurturing

Fathers

Event



This is a 'free' 13-week program tailored to meet the needs and learning styles of any male parenting a child! The class focuses on and explains: the roots of fathering, nurturing children and self, positive discipline methods, managing anger and resolving conflict, teamwork with partner, balancing work and fathering, and more. Childcare and snacks will be provided.

Thursdays, from 12:30 -2:30 p.m.

September 1, 8, 15, 22, 29

October 6, 13, 20, 27

November 3, 10, 17

(No class will be held during Thanksgiving week)

December 1

Educare Central Maine

56 Drummond Ave., Waterville

Presented by Deb Rich and Ruth Lessard

For information and to register in advance please call: Ruth at 859-1514 or Deb at 859-1580

Or visit us at:

www.kvcap.org

The Glickman Family Center

presents

An Evening for Parents Raising Children with Autism Spectrum Disorder

When:

Thursday, September 22, 2011

6:00 - 8:00PM

Where:

Maine Health Conference Center

110 Free Street

Portland, Me 04101

Please Note:

*Admission is Free but space is limited,
so please be sure to register early
for this educational opportunity!*

FMI and to Register: Douglas Robbins at coolee@mmc.org



Nurturing Parenting Grant
awarded
to
the Downeast Children's Council

The Downeast Children's Council, a program of Downeast Health Services Inc., is pleased to receive a new grant from the Maine Children's Trust (\$5,000) for parenting support and educational classes to be held in Hancock and Washington Counties. Nurturing Parenting is first and foremost a philosophy that emphasizes the importance of raising children in a warm, trusting and empathic household

Special Event

The **"ABCs of Parenting"** will be held at **Downeast Health Services, 247 Main Street in Machias,** beginning **Wednesday, September 14th** from **4:30pm-6pm** and **continue for 7 weeks.**

If you are interested in participating in this FREE series, please call Candy Eaton at 667-5304 ext. 261 or email: children@downeasthealth.org to reserve your place.

Pre-registration is required, but all are welcome.

This program will be repeated in Ellsworth next Spring 2012.

Nurturing parenting is the practice of promoting the positive overall growth of children. It is a powerful approach to help children and adults learn to care for themselves, others and their environment. Each week, we will provide participants with an opportunity to discuss and learn from each other about a specific topic. The *"ABCs of Parenting"* will include the following topics: ages and stages, praise, developing empathy, helping children develop personal power and morals and values, rewards and punishments, and establishing family rules.

Lewiston/Auburn Nurturing Parenting Programs

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Fall Schedule 2011

Nurturing Parenting Program for Parents of Infants, Toddlers and Preschoolers:

9/21/11- 4/11/12 Wednesdays from 9:00-11:30am Advocates for Children

Eligibility: Any parent living in Lewiston or Auburn parenting children between the ages of 0-5 years

Program Description: Parents learn about recognizing and understanding feelings, infant and child massage, nurturing parenting routines, discipline strategies, child development, and ways to build self-esteem and self-concept in oneself and children.

Registration: Call Kim at Advocates for Children at 207-783-3990 x224 September 16, 2010

Nurturing Parenting Program for Young Parents and Their Children:

Starting 10/6/11 Thursdays from 1-3:30pm Advocates for Children

Eligibility: For any parent living in Lewiston or Auburn under the age of 20 with children between the ages of 0-6 months

Program Description: Participants will be introduced to infant and child massage, developmental milestones of growth, how to have fun with their children, nurturing parenting routines, and ways to help children build their self-esteem and self-concept. Teens will also learn ways to delay pregnancy, handle peer pressure, sex, sexuality, increase personal power, and build their own positive feelings of self. All participants will also be assigned a home visitor who will assist families with practicing nurturing skills at home.

Registration: Call Kim at Advocates for Children at 207-783-3990 x224 by September 29, 2011

Nurturing Fathers Program: 11/1/11 – 2/7/12 Tuesdays from 6-8pm Location: TBD

Program Description: Lewiston/Auburn fathers will learn the secrets for creating safe, loving, stable, and nurtured families. Positive discipline tools will be taught through unique father-friendly method for successful child behavior management. Effective family communication techniques will be introduced that strengthen the father-child and father-mother relationships. Fathers will learn how to stop fighting and arguing by using proven-effective methods for conflict resolution and problem solving, and learn how to achieve cooperation and team work in family life.

For more information about the Nurturing Parenting Programs visit www.nurturingparenting.com



What exactly *is* Lyme Disease?

Lyme disease is a world-wide infectious disease caused by microscopic bacteria carried by tiny ticks.

How is Lyme Transmitted?

There are several species of deer ticks across the U.S. that become infected with the spiral bacterium, *Borrelia burgdorferi*. Unsuspecting humans and animals walking through woodlands and brushy areas may be bitten by a tick and never know it. The tiny ticks, some the size of poppy seeds, may stay on your body for hours to days. The tick engorges itself with blood. If infected, the spirochete is transmitted to the bloodstream of the person or animal during the bite.

What if I Suspect Exposure?

Early recognition is important. If you find a tiny tick attached to your skin, if you were in a known tick-infested area, or if you have symptoms described herein, see your physician.

What are the Symptoms?

A characteristic red bulls-eye rash (EM) at the site of the bite is present in less than 40% of patients. The rash may appear within days to weeks after the bite, but could be hidden in hairline or underarms. Some patients report flu-like symptoms, fever, aches, fatigue, neck stiffness, jaw discomfort, muscle pain and stiffness, swollen glands, and red eyes. Symptoms may appear, disappear and reappear at various times.

Nervous system abnormalities include memory loss and partial facial paralysis (Bell's palsy). Migratory joint pains, and pains in the tendons, muscles and bones may occur later in the disease. Arthritic symptoms, if present, usually affect the large joints like the knees.

How is Lyme disease Diagnosed?

Lyme disease is a clinical diagnosis. This means that the physician makes the diagnosis using your clinical history and symptoms. If a physician observes an EM rash, a diagnosis of Lyme disease will be made. If a rash is not seen by a physician, laboratory tests are often needed to help with the diagnosis.

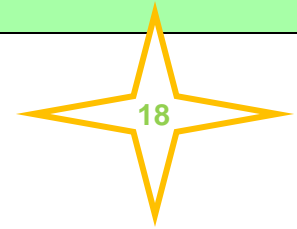
Can Ticks be Tested?

Yes, but not all ticks are infected with the spiral bacterium *B. burgdorferi*. If the tick was saved, it can be tested by a laboratory for the presence of the Lyme bacteria using a test called PCR.

What Tests Are Available?

Many doctors who are unfamiliar with Lyme disease just use the Lyme test available in their local laboratory. This is usually the Lyme ELISA. This tests measure a patients' antibody, IgM and/or IgG, in response to exposure to the Lyme bacteria. By today's standards, these tests are not very sensitive. It is more conclusive to perform the ELISA test in conjunction with Western Blots.

Continued on the next page...



The Western Blot tests can visualize the exact antibodies you are making to the Lyme bacteria. Antibodies are more commonly detected within the first year after infection.

The Lyme Dot Blot Assay (LDA) looks for the presence of pieces of the Lyme bacteria in urine. The assay specificity is between 89-90%.

The PCR (Polymerase Chain Reaction) Test, a highly specific and sensitive test detects the presence of the DNA of the Lyme bacteria. The PCR test is often the only marker that is positive in all stages of Lyme disease. The test can be performed on blood, serum, urine, and miscellaneous fluids/tissues. Unfortunately, Lyme bacteria like to "hide" in the body, therefore, PCR can often be negative

What Is The Treatment?

It is reported that Lyme disease can be treated successfully with antibiotics if caught early in the infection. Some physicians will also utilize alternative health care methods such as homeopathy, acupuncture, etc. to strengthen the patients' immune system in conjunction with traditional methods of treatment. Prevention is the best cure for infection. Patients whose disease is caught late often need to be on antibiotics for longer periods of time. There is controversy between physicians as to the length of treatment. Some physicians feel treatment should continue for 2 months after a patient feels better.

How Can Lyme disease be Prevented?

Wear long sleeve shirts and long pants when going into tick country. Tuck pants into socks and spray clothes with a known tick repellent. After being in a tick area, check skin and all hair areas completely. Check pets, as they are a source of entry for ticks into the house. Once the temperature falls below freezing, ticks become immobile. Spring and fall are their most active time and when we need to be the most vigilant.

Would you like more information?

www.mainelyticks.com (1-877-332-3842)

www.lymediseaseassociation.org (1-888-366-6611)

The above information was obtained from a brochure entitled "What you should know about Lyme Disease" issued by IGeneX, Inc in Palo Alto, California.